

BUILDABLE LOT VERIFICATION REQUEST FORM
REQUIRED INFORMATION

Please Print

Owner of Property _____

Location to be Researched _____ Legal Discription _____

Address _____ Sub Division _____

The information should be sent to: Name _____

Address _____ Phone _____

Fax Number _____

A complete description of the property should accompany this form with a survey of the property if available. A **\$25.00** fee must also accompany this form when submitting the request.

You must either submit in person or by mailing this form to:

Department of Planning & Community Development
Zoning
810 Union Street Room 508
Norfolk, Virginia 23510

All information submitted with this application is non returnable and will be kept as a record in processing this request.

Signed

date